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Testimony of Linda Burghardt, National Alliance on Mental Illness – Michigan House Appropriations Committee – Nov. 13, 2013

Chairman Haveman and Members of the Committee,

I am Linda Burghardt, Executive Director of the National Alliance on Mental Illness – Michigan (NAMI Michigan). NAMI is the country's largest grassroots organization representing those with mental illness and their families and offers educational and support programs at the national, state and local levels.

Thank you for allowing me the opportunity to testify on Senate Bill 374.

NAMI Michigan opposes Senate Bill 374 in its current form for many of the reasons already articulated by our colleagues in the mental health advocacy community. Of particular concern to us is the apparent premise of the legislation, i.e., the necessary and proper response to possible acts or threats of harm or violence is to restrain, contain, and punish, rather than intervene and treat. In many, if not most, of the school violence situations that have occurred, mental health issues have been a significant contributing factor yet I do not see acknowledgement of that anywhere in the legislation. I see roles for law enforcement, the courts, and the Attorney General's office but I do not see any reference to the community mental health agencies, the mental health advocacy community, or the Michigan Department of Community Health (MDCH). I do not know if MDCH was involved in planning the program or drafting the legislation but I believe it would be beneficial to include the state's lead agency on mental health issues, especially if an analysis of a potential threat conducted under the bill indicates the likelihood of a mental health disorder diagnosis. There does not appear to be any mechanism for a transition to a mental health treatment system. The choice seems to be the juvenile justice system or nothing, which is not the answer.

According to NAMI National, 50 percent of all mental illnesses manifest before a person is 14 years old. Approximately 13 percent of youth live with a serious mental illness, but only about 20 percent of these youth get the treatment they need. Instead, all too often they end up in the juvenile justice system, where 70 percent of youth are living with one or more psychiatric disorders. Many schools have proven to be a pipeline into the juvenile justice system with school personnel contacting law enforcement officers when students engage in disruptive behaviors, including cases involving a mental health crisis. All too often, the opportunity for communities to intervene with these youth is lost-resulting in poor outcomes for everyone involved, including schools, law enforcement, youth and their families. Further, once in that system, there is a strong potential for a life of recurring, if not continuous, incarceration – at great human and financial cost. NAMI Michigan would be more likely to support the legislation if provisions were made to address the mental health issues inherent in these situations.

This brings me to our second primary concern – the type and sufficiency of the training for the law enforcement officers. I am aware that there have been Crisis Intervention Team (CIT) trainings for police officers in Michigan but the extent of the training and the curricula have varied considerably and the trainings have been local or regional, certainly not statewide. Yet no situation calls for greater restraint and de-escalation skills on the part of first responders than a mental health crisis involving a minor – the very skills and demeanor that are taught in the trainings. There is in fact a CIT for Youth program that has been designed specifically to improve interactions between youth and law

enforcement officers and to connect youth with mental health needs to effective services and supports in their communities. NAMI Michigan would strongly suggest that any law enforcement officers involved in responding to situations reported under the bill receive the CIT for Youth training and divert minors with potential mental health issues to community mental health services and programs.

Despite our reservations, NAMI Michigan does appreciate the intent of Senate Bill 374 and we would be happy to work with the bill's sponsor, Representative Haveman, and the Committee to develop language that would address the mental health issues and strengthen the bill.

Thank you.

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